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Bib Data Sheet

CONFIRMATION NO. 5366

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/680,746	10/07/2003 RULE	215	3721	12649-00006

APPLICANTS

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** CONTINUING DATA **********

** FOREIGN APPLICATIONS **********

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 01/02/2004

Foreign Priority claimed ☐ yes ☐ no 35 USC 119 (a-d) conditions met ☐ yes ☐ no ☐ Met after Allowance Verified and Acknowledged Examiner's Signature Initials	STATE OR COUNTRY MO	SHEETS DRAWING 6	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3

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TITLE
METHODS AND APPARATUS FOR SHIPPING MEDICAL SUBSTANCES

FILING FEE RECEIVED 1088	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other _____